No. 1407

Introduced by Senator Leno

February 24, 2012

An act to amend Section 10601.2 of the Welfare and Institutions Code, relating to public social services. An act to amend Section 56.11 of the Civil Code, to amend Section 123105 of the Health and Safety Code, and to amend Sections 280 and 281 of the Welfare and Institutions Code, relating to medical information.

LEGISLATIVE COUNSEL'S DIGEST

SB 1407, as amended, Leno. Child welfare: child and family service reviews. Medical information: disclosure.

(1) Existing law governs the release of a patient's medical records and medical information by a health care provider, health care service plan, pharmaceutical company, or provider. Under existing law, a patient may inspect his or her medical records if the patient or his or her representative, as defined, presents a written request to the health care provider. Existing law also authorizes a health care provider, health care service plan, pharmaceutical company, or contractor to release a patient's medical information after receiving a valid signed authorization from the patient, the patient's legal representative, as defined, if the patient is a minor or incompetent, and other specified individuals. Existing law provides that a minor may be removed from the physical custody of his or her parents in dependency proceedings if there is a substantial danger to the physical health of the child or the child is suffering severe emotional damage and there are no reasonable means to protect the child without removing him or her.

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This bill would provide that a minor patient's parent shall not be considered the minor's representative for medical information release purposes if the minor has been removed from that parent's physical custody in dependency proceedings.

(2) Existing law requires a juvenile probation officer in a dependency or delinquency proceeding to prepare a social study, which includes a recommendation for disposition of that case, for disposition hearings. Under existing law, the juvenile court may also order the probation officer to file other written reports and recommendations concerning a minor's custody, status, or welfare. Existing law permits disclosure of medical information to a county social worker, probation officer, or any other person who is legally authorized to have custody or care of a minor for the purpose of coordinating the minor's health care services and medical treatment, including mental health and developmental disability services.

This bill would expand the requirement that a juvenile probation officer prepare a social study to include any disposition hearing in a case involving a nonminor dependent of the court. The bill would also prohibit the probation officer from including any privileged information in the report, including information relating to the minor's health care and mental health treatment, unless the holder of the privilege validly waives that privilege. By increasing the duties of local probation officers to include social studies for cases involving nonminor dependents, this bill would impose a state-mandated local program.

(3) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.

Under existing law, the state, through the State Department of Social Services and county welfare departments, is required to establish and support a public system of statewide child welfare services for the protection of children. Existing law also requires the department to establish the California Child and Family Service Review System to review all county child welfare systems.

This bill would make a nonsubstantive, technical change to that provision.

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Vote: majority. Appropriation: no. Fiscal committee: no-ves. State-mandated local program: no-yes.

The people of the State of California do enact as follows:

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SECTION 1. Section 56.11 of the Civil Code is amended to 2 read:

56.11. Any person or entity that wishes to obtain medical information pursuant to subdivision (a) of Section 56.10, other than a person or entity authorized to receive medical information pursuant to subdivision (b) or (c) of Section 56.10, except as provided in paragraph (21) of subdivision (c) of Section 56.10, shall obtain a valid authorization for the release of this information.

An authorization for the release of medical information by a provider of health care, health care service plan, pharmaceutical company, or contractor shall be valid if it:

- (a) Is handwritten by the person who signs it or is in a typeface no smaller than 14-point type.
- (b) Is clearly separate from any other language present on the same page and is executed by a signature which serves no other purpose than to execute the authorization.
 - (c) Is signed and dated by one of the following:
- (1) The patient. A patient who is a minor may only sign an authorization for the release of medical information obtained by a provider of health care, health care service plan, pharmaceutical company, or contractor in the course of furnishing services to which the minor could lawfully have consented under Part 1 (commencing with Section 25) or Part 2.7 (commencing with Section 60).
- (2) The legal representative of the patient, if the patient is a minor or an incompetent. However, authorization may not be given under this subdivision for the disclosure of medical information obtained by the provider of health care, health care service plan, pharmaceutical company, or contractor in the course of furnishing services to which a minor patient could lawfully have consented under Part 1 (commencing with Section 25) or Part 2.7 (commencing with Section 60). A parent or guardian is not considered the legal representative of a minor patient for purposes of this paragraph if the minor has been removed from the physical

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1 custody of the parent or guardian pursuant to Section 300 of the
 2 Welfare and Institutions Code.
 3 (3) The spouse of the patient or the person financially

- (3) The spouse of the patient or the person financially responsible for the patient, where the medical information is being sought for the sole purpose of processing an application for health insurance or for enrollment in a nonprofit hospital plan, a health care service plan, or an employee benefit plan, and where the patient is to be an enrolled spouse or dependent under the policy or plan.
- (4) The beneficiary or personal representative of a deceased patient.
- (d) States the specific uses and limitations on the types of medical information to be disclosed.
- (e) States the name or functions of the provider of health care, health care service plan, pharmaceutical company, or contractor that may disclose the medical information.
- (f) States the name or functions of the persons or entities authorized to receive the medical information.
- (g) States the specific uses and limitations on the use of the medical information by the persons or entities authorized to receive the medical information.
- (h) States a specific date after which the provider of health care, health care service plan, pharmaceutical company, or contractor is no longer authorized to disclose the medical information.
- (i) Advises the person signing the authorization of the right to receive a copy of the authorization.
- SEC. 2. Section 123105 of the Health and Safety Code is amended to read:
 - 123105. As used in this chapter:
 - (a) "Health care provider" means any of the following:
- (1) A health facility licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2.
- (2) A clinic licensed pursuant to Chapter 1 (commencing with Section 1200) of Division 2.
- 35 (3) A home health agency licensed pursuant to Chapter 8 (commencing with Section 1725) of Division 2.
- 37 (4) A physician and surgeon licensed pursuant to Chapter 5 38 (commencing with Section 2000) of Division 2 of the Business 39 and Professions Code or pursuant to the Osteopathic Act.

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(5) A podiatrist licensed pursuant to Article 22 (commencing with Section 2460) of Chapter 5 of Division 2 of the Business and Professions Code.

- (6) A dentist licensed pursuant to Chapter 4 (commencing with Section 1600) of Division 2 of the Business and Professions Code.
- (7) A psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900) of Division 2 of the Business and Professions Code.
- (8) An optometrist licensed pursuant to Chapter 7 (commencing with Section 3000) of Division 2 of the Business and Professions Code.
- 12 (9) A chiropractor licensed pursuant to the Chiropractic Initiative 13 Act.
 - (10) A marriage and family therapist licensed pursuant to Chapter 13 (commencing with Section 4980) of Division 2 of the Business and Professions Code.
 - (11) A clinical social worker licensed pursuant to Chapter 14 (commencing with Section 4990) of Division 2 of the Business and Professions Code.
 - (12) A physical therapist licensed pursuant to Chapter 5.7 (commencing with Section 2600) of Division 2 of the Business and Professions Code.
 - (13) An occupational therapist licensed pursuant to Chapter 5.6 (commencing with Section 2570).
 - (14) A professional clinical counselor licensed pursuant to Chapter 16 (commencing with Section 4999.10) of Division 2 of the Business and Professions Code.
 - (b) "Mental health records" means patient records, or discrete portions thereof, specifically relating to evaluation or treatment of a mental disorder. "Mental health records" includes, but is not limited to, all alcohol and drug abuse records.
 - (c) "Patient" means a patient or former patient of a health care provider.
 - (d) "Patient records" means records in any form or medium maintained by, or in the custody or control of, a health care provider relating to the health history, diagnosis, or condition of a patient, or relating to treatment provided or proposed to be provided to the patient. "Patient records" includes only records pertaining to the patient requesting the records or whose representative requests the records. "Patient records" does not

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include information given in confidence to a health care provider by a person other than another health care provider or the patient, and that material may be removed from any records prior to inspection or copying under Section 123110 or 123115. "Patient records" does not include information contained in aggregate form, such as indices, registers, or logs.

- (e) "Patient's representative" or "representative" means any of the following:
- (1) A parent or guardian of a minor who is a patient, unless the minor patient has been removed from the physical custody of the parent or guardian pursuant to Section 300 of the Welfare and Institutions Code.
 - (2) The guardian or conservator of the person of an adult patient.
- (3) An agent as defined in Section 4607 of the Probate Code, to the extent necessary for the agent to fulfill his or her duties as set forth in Division 4.7 (commencing with Section 4600) of the Probate Code.
- (4) The beneficiary as defined in Section 24 of the Probate Code or personal representative as defined in Section 58 of the Probate Code, of a deceased patient.
- (f) "Alcohol and drug abuse records" means patient records, or discrete portions thereof, specifically relating to evaluation and treatment of alcoholism or drug abuse.
- SEC. 3. Section 280 of the Welfare and Institutions Code is amended to read:
- 280. (a) Except where waived by the probation officer, judge, or referee and the minor, the probation officer shall be present in court to represent the interests of each person who is the subject of a petition to declare that person to be a ward or dependent child upon all hearings or rehearings of his or her case, and shall furnish to the court such information and assistance as the court may require. If so ordered, the probation officer shall take charge of that person before and after any hearing or rehearing.

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(b) It shall be the duty of the probation officer to prepare for every hearing on the disposition of a case a social study of the minor, containing any matters that may be relevant to a proper disposition of the case, as provided by Section 356, 358, 358.1, 361.5, 364, 366, 366.2, or 366.21, 366.22, 366.25, 366.26, 366.3, 391, 702, or any other hearing for a dependent minor or nonminor

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dependent if a social study is required by law, as is appropriate for the specific hearing, or, for a hearing as provided by Section 702, a social study of the minor, containing such matters as may be relevant to a proper disposition of the case. The social study shall include a recommendation for the disposition of the case, but shall not contain any information that is privileged pursuant to Division 8 (commencing with Section 900) of the Evidence Code, including, but not limited to, privileged information that is already contained in the probation or child welfare file, or information obtained pursuant to Section 56.103 of the Civil Code or Section 5328.04, unless there is a valid waiver by the holder of the privilege.

SEC. 4. Section 281 of the Welfare and Institutions Code is amended to read:

- 281. (a) The probation officer shall, upon order of any court in any matter involving the custody, status, or welfare of a minor or minors, make an investigation of appropriate facts and circumstances and prepare and file with the court written reports and written recommendations in reference to—such those matters. The court is authorized to receive and consider the reports and recommendations of the probation officer in determining any—such matter: of those matters.
- (b) A written report under this section shall not include any information that is privileged pursuant to Division 8 (commencing with Section 900) of the Evidence Code, including, but not limited to, privileged information already contained in the probation or child welfare file, or information obtained pursuant to Section 56.103 of the Civil Code or Section 5328.04, unless there is a valid waiver by the holder of the privilege.
- SEC. 5. If the Commission on State Mandates determines that this act contains costs mandated by the state, reimbursement to local agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code.
- SECTION 1. Section 10601.2 of the Welfare and Institutions Code is amended to read:
- Code is amended to read:
 10601.2. (a) The State Department of Social Services shall establish, by April 1, 2003, the California Child and Family Service
 Review System, to review all county child welfare systems. These

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reviews shall cover child protective services, foster care, adoption, family preservation, family support, and independent living.

- (b) Child and family service reviews shall maximize compliance with the federal regulations for the receipt of money from Subtitle E (commencing with Section 470) of Title IV of the federal Social Security Act (42 U.S.C. Sec. 670 and following) and ensure compliance with state plan requirements set forth in Subtitle B (commencing with Section 421) of Title IV of the federal Social Security Act (42 U.S.C. Sec. 621 and following).
- (c) (1) By October 1, 2002, the California Health and Human Services Agency shall convene a workgroup comprised of representatives of the Judicial Council, the State Department of Social Services, the State Department of Health Care Services, the State Department of Mental Health, the State Department of Education, the Department of Child Support Services, the State Department of Justice, any other state departments or agencies the California Health and Human Services Agency deems necessary. the County Welfare Directors Association, the California State Association of Counties, the Chief Probation Officers of California, the California Youth Connection, and representatives of California tribes, interested child advocacy organizations, researchers, and foster parent organizations. The workgroup shall establish a workplan by which child and family service reviews shall be conducted pursuant to this section, including a process for qualitative peer reviews of case information.
- (2) At a minimum, in establishing the workplan, the workgroup shall consider any existing federal program improvement plans entered into by the state pursuant to federal regulations, the outcome indicators to be measured, compliance thresholds for each indicator, timelines for implementation, county review eyeles, uniform processes, procedures and review instruments to be used, a corrective action process, and any funding or staffing increases needed to implement the requirements of this section. The agency shall broadly consider collaboration with all entities to allow the adequate exchange of information and coordination of efforts to improve outcomes for foster youth and families.
- (d) (1) The California Child and Family Service Review System outcome indicators shall be consistent with the federal child and family service review measures and standards for child and family outcomes and system factors authorized by Subtitle B (commencing

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with Section 421) and Subtitle E (commencing with Section 470) of Title IV of the federal Social Security Act and the regulations adopted pursuant to those provisions (Parts 1355 to 1357, inclusive, of Title 45 of the Code of Federal Regulations).

- (2) During the first review cycle pursuant to this section, each county shall be reviewed according to the outcome indicators established for the California Child and Family Service Review System.
- (3) For subsequent reviews, the workgroup shall consider whether to establish additional outcome indicators that support the federal outcomes and any program improvement plan, and promote good health, mental health, behavioral, educational, and other relevant outcomes for children and families in California's child welfare services system.
- (e) The State Department of Social Services shall identify and promote the replication of best practices in child welfare service delivery to achieve the measurable outcomes established pursuant to subdivision (d).
- (f) The State Department of Social Services shall provide information to the Assembly and Senate Budget Committees and appropriate legislative policy committees annually, beginning with the 2002–03 fiscal year, on all of the following:
- (1) The department's progress in planning for the federal child and family service review to be conducted by the United States Department of Health and Human Services and, upon completion of the federal review, the findings of that review, the state's response to the findings, and the details of any program improvement plan entered into by the state.
- (2) The department's progress in implementing the California ehild and family service reviews, including, but not limited to, the timelines for implementation, the process to be used, and any funding or staffing increases needed at the state or local level to implement the requirements of this section.
- (3) The findings and recommendations for child welfare system improvements identified in county self-assessments and county system improvement plans, including information on common statutory, regulatory, or fiscal barriers identified as inhibiting system improvements, any recommendations to overcome those barriers, and, as applicable, information regarding the allocation

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1 and use of the moneys provided to counties pursuant to subdivision2 (i).

- (g) Effective April 1, 2003, the existing county compliance review system shall be suspended to provide to the State Department of Social Services sufficient lead time to provide training and technical assistance to counties for the preparation necessary to transition to the new child and family service review system.
- (h) Beginning January 1, 2004, the department shall commence individual child and family service reviews of California counties. County child welfare systems that do not meet the established compliance thresholds for the outcome measures that are reviewed shall receive technical assistance from teams made up of state and peer-county administrators to assist with implementing best practices to improve their performance and make progress toward meeting established levels of compliance.
- (i) (1) To the extent that funds are appropriated in the annual Budget Act to enable counties to implement approaches to improve their performance on the outcome indicators under this section, the department, in consultation with counties, shall establish a process for allocating the funds to counties.
- (2) The allocation process shall take into account, at a minimum, the extent to which the proposed funding would be used for activities that are reasonably expected to help the county make progress toward the outcome indicators established pursuant to this section, and the extent to which county funding for the Child Abuse, Prevention and Treatment program is aligned with the outcome indicators.
- (3) To the extent possible, a county shall use funds allocated pursuant to this subdivision in a manner that enables the county to access additional federal, state, and local funds from other available sources. However, a county's ability to receive additional matching funds from these sources shall not be a determining factor in the allocation process established pursuant to this subdivision.
- (4) The department shall provide information to the appropriate committees of the Legislature on the process established pursuant to this subdivision for allocating funds to counties.